

2010

Dependent Coverage: Insurers are required to cover children up to age 26 on their parents' plan.

High-Risk Pool for Pre-existing Conditions: Funding is limited and individuals may be placed on a waiting list.

Pre-existing Conditions for Children: Limited protections to preclude insurance from excluding children with pre-existing condition.

Lifetime Benefit Limits and Annual Caps: Insurers are prohibited from including lifetime benefit limits on policies and prohibits the use of restrictive annual limits.

Rescissions: Insurers prohibited from rescinding insurance policies.

Cost-sharing Prohibition: Cost-sharing for preventive services is prohibited.

Medical Loss Ratios: Insurers must annually report on the share of premium dollars spent on medical care and provide consumer rebates for medical loss ratios determined to be "excessive."

Administrative/Appeals Process: Employee Retirement Income Security Act (ERISA) covered plans must establish new appeals process.

2011

CLASS Program auto-enrollment: The federal government will establish a national insurance program for long-term care. The federal government will force employers to sign up their employees for payroll deductions in 2011 unless the employee specifically waives enrollment in writing.

2014

Health Insurance Exchanges: The federal government will require the state of Illinois to establish an exchange for federally-approved health insurance.

Reinsurance and Risk Adjustment: States must first institute temporary reinsurance for individual and small group and then transition to risk adjustment.

Multi-State Plans: Office of Personnel Management (OPM) must offer at least two multi-state plans in every state that meets the requirements of the exchange and have a separate risk pool from the Federal Employees Health Benefits Program.

Federal Standards for Insurance: The federal government will require all insurance plans to include federally-mandated benefits and coverage levels (Bronze, Silver, Gold, and Platinum).

Guaranteed Issue and Renewability: The federal government will require insurers to offer coverage to anyone wanting a policy and every policy has to be renewed.

Pre-Existing Conditions: The federal government will mandate that insurers cannot impose any pre-existing condition exclusion.

Community Rating: Insurers in the individual or small group markets cannot vary premiums except: individual or family coverage; geography; 3 to 1 for age; 1.5 to 1 for smoking.

New Individual Mandate Begins: The federal government will require all Americans to buy insurance or face taxes up to \$696 or 2.5% of income (whichever is greater).

New Employer Mandate Begins: The federal government will require all employers with more than 50 employees who do not offer insurance or who offer coverage but their employees receive a federal insurance subsidy to pay a penalty of up to \$2,000 per employee for each employee over 30 employees.

New Insurance Subsidies Available: For individual or families above the Medicaid eligibility cutoff, but below 400% of poverty (currently \$88,200 for a family of four) who are not offered or eligible for other insurance coverage, a tax credit is available to purchase insurance through the new government exchanges.

State Compacts: If the federal government approves, the state of Illinois would be allowed to begin a multi-state compact for insurance.

2017

Large Group Market: If the federal government approves, Illinois may allow large group insurers to sell in the exchange.

Waiver for State Innovation: If the federal government approves, Illinois may ask for a limited waiver from certain federal requirements.

2018

New Premium Insurance Tax: The federal government will impose a new 40% tax on high-quality insurance plans that it defines as “High-Cost”.